Electronic Filing System (EFS) Data Electronic Patent Application Submission USPTO Use Only

EFS ID:

17449

Application ID:

10064898

FILTER HOUSING ASSEMBLY FOR

USE IN OXYGEN

Title of Invention:

CONCENTRATORS AND OTHER

COMPRESSORS

First Named Inventor:

Harold Amann

Domestic/Foreign Application:

Domestic Application

Filing Date:

null

Effective Receipt Date:

2002-08-27

Utility Patent Filing

Filing Type:

new-utility

Confirmation Number:

Submission Type:

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Attorney Docket Number:

718149.2

Digital Certificate Holder:

cn=Samuel Digirolamo, ou=Registered Attorneys, ou=Patent and

Trademark Office, ou=Department of Commerce, o=U.S.

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Total Fees Authorized:

\$689.0

Payment Category:

DA - Deposit Account

Deposit Account Number:

110160

Deposit Account Name:

Samuel Digirolamo

TRANSMITTAL FORM



Electronic Version 1.0.3

Stylesheet Version: 1.0

Attorney Docket Number:

718149.2

Submission Type: Utility Patent

Filing

FILTER HOUSING ASSEMBLY FOR USE IN OXYGEN CONCENTRATORS AND **OTHER COMPRESSORS**

First Named Inventor: Harold P. Amann

SUBMITTED BY

Name:

Samuel Digirolamo

Registration Number:

29,915

Electronic Signature Mark: /Samuel

Digirolamo/

Date Signed: 20020827

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Attached Files:

declaration

DECLARATION1.tif

declaration

DECLARATION2.tif

bibd-transmittal
patent-assignments
fee-transmittal
us-information-disclosure-statement
specification

Attached Image File(s): DECLARATION1.tif DECLARATION2.tif 7181492apds.xml 7181492asgn.xml 7181492fee.xml 7181492ids.xml Application.xml Comments:

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 DECLARATION H				r	Docket Num		718149.2		
DECLARATION I		ALL OF		First Named Inventor			AMANN, Harole	i P.	
PATENT AP		ON		COMPLETE IF KNOWN					
(37 CF)				Applicati	ion Number	Unkno	own		
☐ Declaration Submitted OR	☐ Decla	ration itted after	Initial	Filing Da		Herewi	Herewith		
With Initial Filing	Filing	Filing (surcharge (37 CFR 1.16 (e))		Group A	rt Unit	Unkno	Unknown		
Ü	requi	red)		Examine	r Name	Unkno			
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: FILTER HOUSING ASSEMBLY FOR USE IN OXYGEN CONCENTRATORS AND OTHER COMPRESSORS (Title of the Invention)									
the specification of which is attached hereto OR was filed on (MM/DD/YY) as United States Application Number or PCT International (if applicable).									
Application Number I hereby state that I have revie amended by any amendment s I acknowledge the duty to discontinuation-in-part application	specifically re	eferred to a	contents	of the abovial to patent	tability as defi	pecification of the pecifi	37 CFR 1.56, incl	luding for	
and the national or PCT interr I hereby claim foreign priority certificate, or 365(a) of any PC America, listed below and have certificate, or any PCT interna-	national filing benefits und CT internation ve also identi	date of the date o	e continuance. 119(a) ation which, by checking a filing	ation-in-par -(d) or 365 th designate ting the box date before	rt application. (b) of any forced at least one control of the approximation and the app	eign app country application	olication(s) for pay other than the Ution for patent or on on which prior	tent or inventor inited States of inventor's rity is claimed.	
Prior Foreign Application	Counti	.		Filing Date D/YYYY)		•	Certified Co	opy Attached? NO	
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Additional foreign applica	tion numbers	are listed	on a supp	lemental pr	iority data sho	eet PTO	/SB/02B attached	d hereto:	
I hereby claim the benefit und									
Application Numb				te (MM/DI			Additional provis numbers are liste supplemental prio PTO/SB/02B atta	d on a ority data sheet	

[Page 1 of 2]

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	tomer Number Bar Code Label	27128		OI	× 🗵	Correspondence address below			
Name Samuel Digirolamo									
Address Blackwell Sanders Peper Ma	rtin LLP								
Address 720 Olive Street, Suite 2400			•			I			
City St. Louis			State	Missouri		ZIP 63101			
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NAME OF SOLE OR FIRST INVENT	OR:		A pe	tition has b	en file	d for this unsigned inventor			
Given Name (first and middle [if any]) Harold P.	Given Name Family Name								
Inventor's Signature / Carolel f.	aman	u				Date 8/17/02			
Residence City: Sunset Hills		State:	мо	Country	: USA	Citizenship: USA			
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City: Sunset Hills	State: MO			ZIP: 6312	6	Country: USA			
NAME OF SECOND INVENTOR:	NAME OF SECOND INVENTOR:								
Given Name (first and middle [if any]) Family Name Or Surname									
Inventor's Signature						Date			
Residence City:		State		Country	-	Citizenship			
Mailing Address									
Mailing Address									
City	State			ZIP		Country			
Additional inventors are being name			ditiona	l Inventor(s	sheet(s) PTO/SB/02A attached hereto			

[Page 2 of 2]

FEE TRANSMITTAL

Electronic Version 1.1.0 Stylesheet Version: 1.0

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SUBMITTED BY

Authorized Name:

Samuel Digirolamo

Electronic Signature Mark:

/Samuel Digirolamo/

Date Signed:

20020827

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	201	\$ 370

Subtotal For Basic Filing Fee: \$ 370

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid	
Total Claims: 37	203	\$ 9	17	\$ 153	
Independent Claims: 6	202	\$ 42	. 3	\$ 126	

Subtotal For Extra Claims Fees: \$ 279

ADDITIONAL FEES

Fee Description	Number	Quantity	Fee Code	Amount	Fee Paid	
Recording Each Patent Assignment Per Property Fee	00000000	1	581	\$ 40	\$ 40	

Subtotal For Additional Fees: \$ 40